# White River Junction Health District 2012 Behavioral Risk Factor Surveillance System Data Guidance Prevention Protection Support

VDH – Public Health Statistics May 2014



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#### What is the Behavioral Risk Factor Surveillance System or BRFSS?

The Behavioral Risk Factor Surveillance System (BRFSS) is a telephone survey conducted annually among adults 18 and older. The Vermont BRFSS is conducted by the Vermont Department of Health (VDH) in collaboration with the Centers for Disease Control and Prevention (CDC). All U.S. states, Washington D.C. and several U.S. territories participate in the survey.

Typically between 6,000 and 7,000 Vermont adults are interviewed as part of the Vermont BRFSS each year. Vermont residents ages 18 and older are eligible for the survey. A Vermont resident is defined as someone living in the state for at least 30 days in a given calendar year. Adults living in institutions such as nursing homes, group homes, or prisons are not eligible for the survey.

The BRFSS survey includes questions on chronic disease prevalence (e.g. asthma diagnosis), risk behaviors (e.g. currently smoke), demographics (e.g. age, gender, race), health care access (e.g. have health insurance), and preventive behaviors and health screening (e.g. routine visits to a doctor or colorectal cancer screening).

Additional information can be found on the VDH and CDC websites:

- <a href="http://healthvermont.gov/research/brfss.aspx">http://healthvermont.gov/research/brfss.aspx</a>
- http://www.cdc.gov/brfss/

A report summarizing the 2012 statewide results from the Vermont BRFSS can also be found on the VDH website: <a href="http://healthvermont.gov/research/brfss/documents/summary">http://healthvermont.gov/research/brfss/documents/summary</a> brfss 2012.pdf

#### Recent Changes to BRFSS Methodology

In 2011, the CDC implemented changes to the BRFSS weighting methodology in order to more accurately represent the adult population. Population weights are now calculated using iterative proportional fitting (or "raking") methodology. This allows the weights to be calculated using smaller sample sizes, adjusts for more demographic variables, and incorporates cell phone interview data into estimates.

While these adjustments make the calculations more representative of the population, the changes in methodology also limit the ability to compare 2011 results to previous years. VDH's Center for Health Statistics recommends that comparisons between 2011 BRFSS data and earlier years be made with caution. Statistical differences between 2011 and earlier years may be due to methodological changes, rather than changes in opinion or behavior.

#### <u>Demographics of White River Junction Health District\*</u>

The next few pages describe the demographic makeup of White River Junction area adults in 2011-2012.

Slightly more than half of White River Junction adults are male. About six in ten adult White River Junction area residents are 25-64, with two in ten ages 65 and older.

 White River Junction area adults report a similar age distribution to Vermont adults overall.

About four in ten White River Junction area adults have a high school degree or less. A third have a college degree or higher, while 28% have some college education.

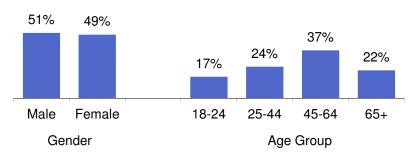
 White River Junction area adults report a similar education distribution to Vermont adults overall.

Just under half of White River Junction area adults live in a home making \$50,000 or more annually. About a quarter each live in homes making \$25,000 to less than \$50,000 annually (24%) and less than \$25,000 a year (28%).

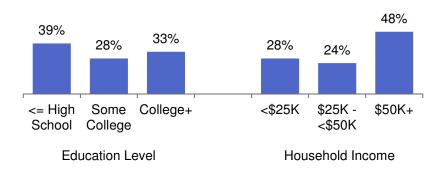
 There are no statistical differences between White River Junction adults and Vermont adults overall by annual income level.

Four percent of adults in the White River Junction area report being a racial or ethnic minority. This is statistically similar to the five percent reported among Vermont adults overall.

## White River Junction Residents by Gender and Age



## White River Junction Residents by Socio-Economic Status



<sup>\*</sup>See page 27 for a list of the towns included in the White River Junction Health District.

### <u>Demographics of White River Junction Health District</u>

Six in ten White River Junction adult residents are currently employed, two in ten are retired. Eleven percent said they are a student or homemaker, and five percent or less said they are unemployed or unable to work.

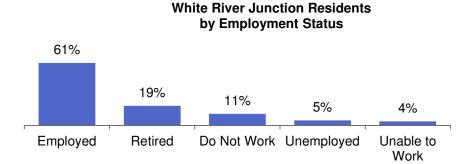
 White River Junction area adults reported a similar employment distribution to Vermont adults overall.

Half of White River Junction adults are married. More than two in ten have never married, while thirteen percent are divorced. Seven percent or less are part of an unmarried widowed couple.

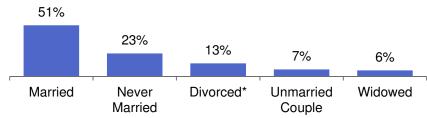
 Adults in the White River Junction area reported similar rates of marital status, as compared with Vermont adults overall.

Seven in ten adults in the White River Junction area said there are no children less than 18 in their home. Twelve percent each reported having one or two children while five percent have three or more children.

 The number of children in the home reported by White River Junction area adults was similar to that for Vermont overall.

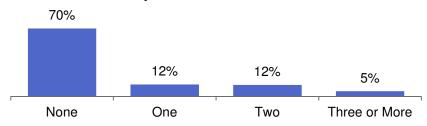






<sup>\*</sup>Includes those who reported their marital status as divorced or separated.

## White River Junction Residents by Children in Household



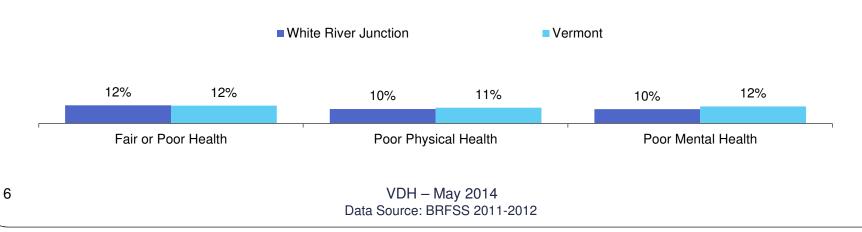
#### **Health Status Indicators**

In 2011-2012, one in eight White River Junction area adults reported fair or poor general health. One in ten each reported having poor physical health and poor mental health.

• Poor mental and physical health were defined as 14 or more days of poor mental/physical health in the last month.

There are no statistically significant differences in health status, regardless of the measure, when comparing White River Junction area adults and Vermont adults overall.



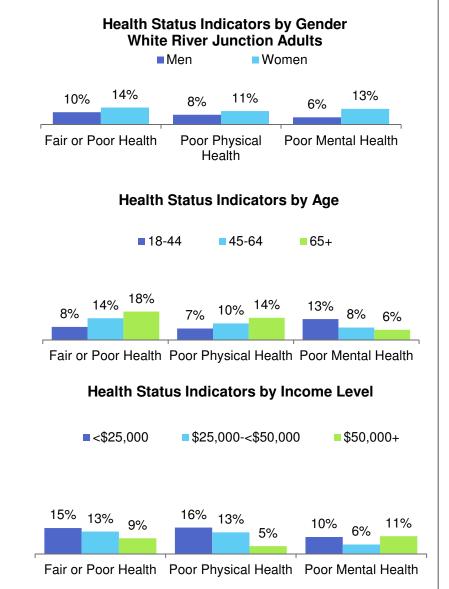


#### **Health Status Indicators**

Rates of fair or poor general health, poor physical health, and poor mental health among White River Junction area adults do not differ significantly by gender or age.

Among White River Junction area adults, reported fair or poor general and poor physical health decrease with increasing household income.

- There are no statistical differences in fair or poor general health or poor mental health by income level.
- Adults in homes making \$50,000 or more per year are significantly less likely to report poor physical health as compared with those in homes with less income.

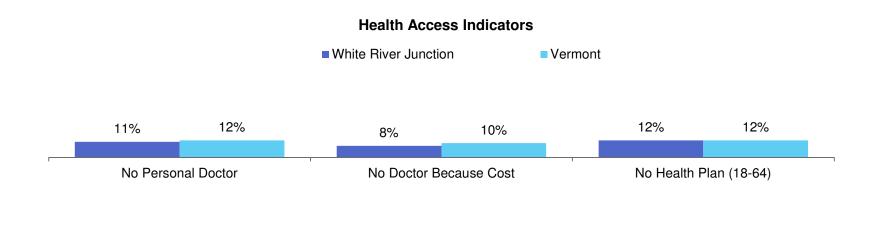


#### **Health Access Indicators**

8

In 2011-2012, one in nine adults in the White River Junction area said they do not have a personal doctor for health care. Fewer, one in twelve said they needed care in the last year but did not seek it due to the cost. Among White River Junction area adults ages 18-64, twelve percent said they do not have health insurance.

There are no differences in health care access, regardless of the measure, when comparing White River Junction area adults and Vermonters overall.



#### **Health Access Indicators**

There are no statistically significant differences by gender in any health care access measure, among White River Junction area adults.

Poor health care access decreases with increasing age.

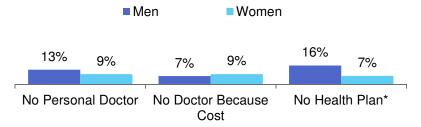
- White River Junction adults 65 and older are significantly less likely than those 18-64 to not have a personal doctor and report delaying care due to cost.
- There are no statistically significant differences in not having a health plan by age.

Adults in the White River Junction area with lower annual household incomes are more likely to report not having a health care provider or a health plan.

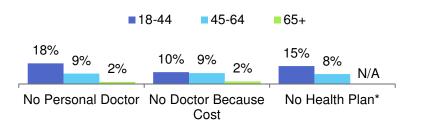
- Adults living in homes with an income of less than \$25,000
  a year are significantly more likely to not have a doctor
  than those in homes with more income.
- White River Junction area adults in homes making less than \$25,000 are significantly more likely to not have a health plan as compared with those in homes making \$50,000 or more annually (26% vs. 6%).

There are no differences in delaying care due to cost by annual household income level.

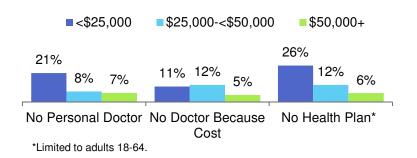
## Health Access Indicators by Gender White River Junction Adults



#### **Health Access Indicators by Age**



#### **Health Access Indicators by Income Level**



## **Disability**

Less than a quarter of Vermont adults reported having a disability (21%) in 2012. This is similar to the 23% reported among adults in the White River Junction area.

 Disability was defined as having activity limitations due to physical, emotional or mental problems OR any health problem that requires use of special equipment.

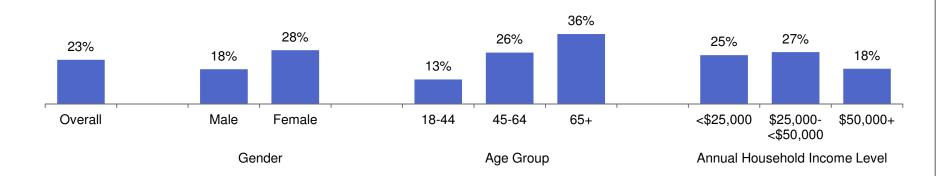
Women in the White River Junction area are significantly more likely than men to report being disabled (28% vs. 18%).

Reported disability among White River Junction area adults increases with increasing age.

Adults 18-44 are significantly less likely to be disabled compared with those in older age groups.

There are no significant differences in disability by annual household income, among White River Junction adults.

## Disability, Overall and by Sub-groups White River Junction Adults



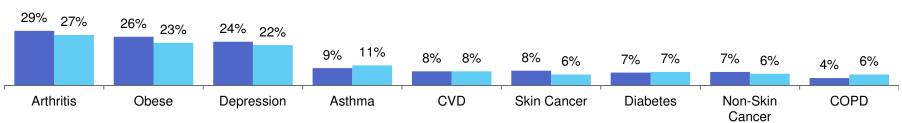
Less than a third of White River Junction area reported having arthritis. Slightly fewer, 26% were obese and 24% have ever been diagnosed with a depressive disorder.

Less than one in ten reported being diagnosed with each of the following conditions: asthma, cardiovascular disease, skin cancer, diabetes, a non-skin cancer, and COPD.

There are no statistical differences in any chronic disease prevalence among White River Junction area adults compared with Vermont adults overall.

#### **Prevalence of Selected Chronic Conditions**

■ White River Junction ■ Vermont



CVD = cardiovascular disease

Obesity data is limited to adults 20 and older and is age-adjusted to the U.S. 2000 population.

Among White River Junction area adults, a diagnosis of a depressive disorder or asthma are significantly more likely among females than males.

- Nearly a third of females (32%) reported a depressive disorder, compared with 15% of males.
- Thirteen percent of females said they have asthma versus only 6% of males.

There are no significant differences in the prevalence of arthritis or obesity by gender, among White River Junction area adults.

Arthritis prevalence among White River Junction adults increases with increasing age.

All differences by age are statistically significant.

Conversely, depressive disorders are more likely to be reported among younger adults.

 Adults 65 and older are significantly less likely to have a depressive disorder than those 45 to 64.

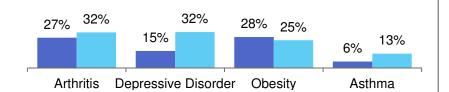
Rates of obesity and asthma among White River Junction area adults do not differ significantly by age.

Prevalence of obesity decreases with increasing annual household income level.

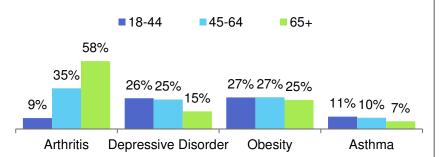
 Adults in homes making \$50,000 or more annually are significantly less likely to be obese compared with those in homes making less than \$25,000.

There are no differences in arthritis, depressive disorders, or asthma prevalence by annual household income level.

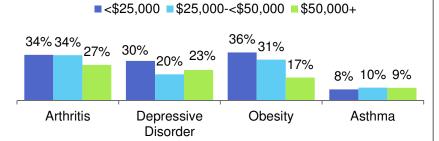




#### **Chronic Conditions by Age**



#### **Chronic Conditions by Income Level**



Note: Obesity data are for adults 20 and older and, except that by age, are age adjusted to U.S. 2000 standard population.

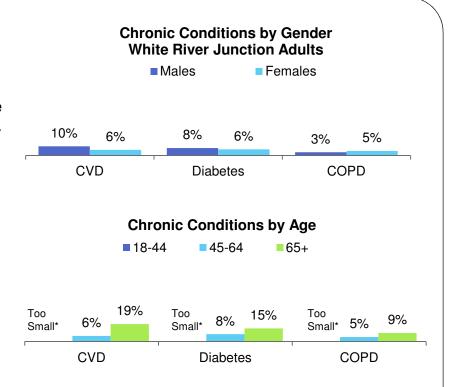
There are no statistically significant differences by gender for the prevalence of cardiovascular disease, diabetes, and COPD.

Reported cardiovascular disease, diabetes and COPD among White River Junction area adults are all highest among those 65 and older.

- Adults 65 and older are significantly more likely to have cardiovascular disease than those 45-64.
- While the prevalence of diabetes and COPD are higher among older adults, there is no statistical difference compared with those 45-64.

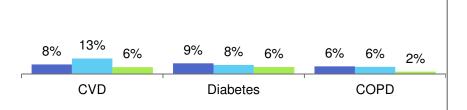
White River Junction area adults living in homes with low household incomes are significantly more likely to say they have COPD compared with those in homes making \$50,000 or more per year (2% vs. 6%).

 There are no statistically significant differences in diabetes or cardiovascular disease prevalence by annual household income.





**■**<\$25,000 **■**\$25,000-<\$50,000 **■**\$50,000+



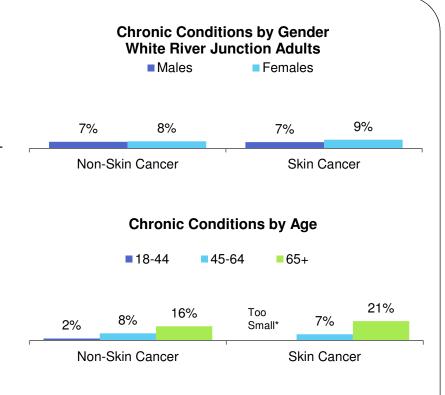
<sup>\*</sup>Sample size is too small to report

There are no statistical differences by gender in the prevalence of non-skin cancer or skin cancer, among White River Junction adults.

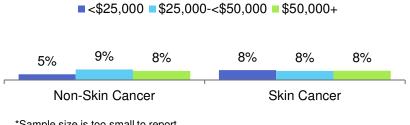
The prevalence of both skin cancer and non-skin cancers among White River Junction area adults increases with increasing age.

- Adults 65 and older are significantly more likely than those 18-44 to report ever being diagnosed with a non-skin cancer.
- Similarly, those 65 and older are significantly more likely than those 45-64 to have been diagnosed with skin cancer.

White River Junction adults report similar rates of non-skin cancer and skin cancer by annual household income level.



#### **Chronic Conditions by Income Level**



\*Sample size is too small to report

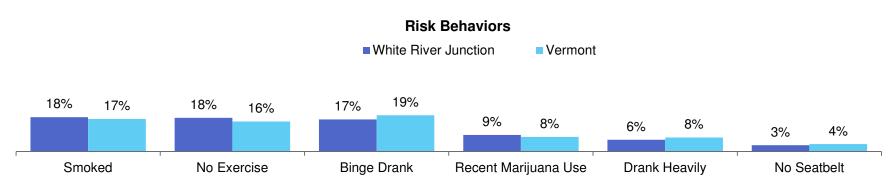
In 2011-2012, eighteen percent of White River Junction area adults said they currently smoke or do not participate in any leisure time physical activity. Of smokers, 52% tried to quit smoking at least once during the previous year. This is similar to the 62% reported among Vermont smokers.

About one in six said they binge drank in the past month, while six percent heavily drank.

- Binge drinking was defined as five or more drinks in one sitting for men and four or more drinks for women.
- Heavy drinking was defined as more than two drinks per day for men and more than one for women.

Fewer than one in ten each said they used marijuana recently or wear their seatbelt seldom to never.

White River Junction area and Vermont adults had similar prevalences for all risk factor measures.



Note: Smoking and exercise data are age adjusted to the U.S. 2000 standard population

There are no statistically significant differences in White River Junction adults in the rates of current smoking and not participating in physical activity, by gender.

Among White River Junction area adults, smoking prevalence decreases with increasing age.

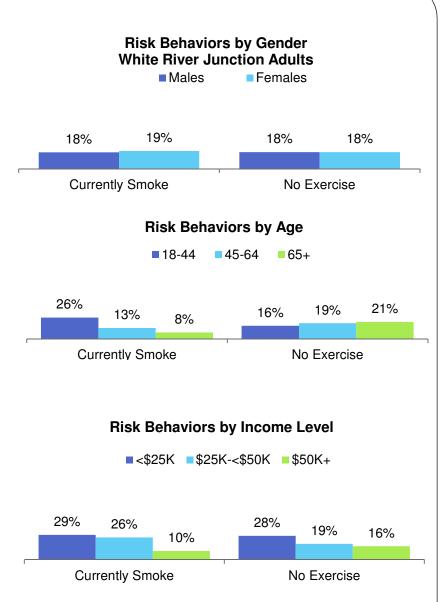
 Adults 18-44 are significantly more likely to smoke than those in older age groups.

Not participating in physical activity does not vary significantly by age.

Smoking also decreases with increasing income level.

 Adults in homes making \$50,000 or more per year are significantly less likely to smoke than those in homes making less than \$25,000 annually.

There are no statistically significant differences among White River Junction adults in not participating in physical activity by annual household income level.



Note: Smoking and physical activity data, except that by age, are age-adjusted to the U.S. 2000 population.

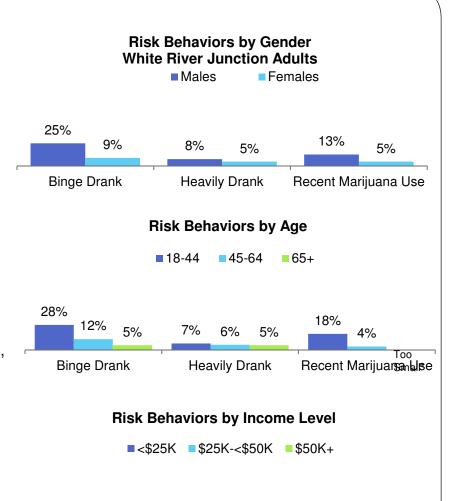
One quarter of men in the White River Junction area said they binge drank in the last month. This is significantly higher than the 9% reported among women.

There are no significant differences in heavy drinking and recent marijuana use.

Binge drinking and recent marijuana use decrease with increasing age.

- All differences in binge drinking by age are statistically significant.
- Marijuana use is significantly more likely among adults 18-44 versus those 45-64.
- Heavy drinking does not vary significantly by age.

There are no statistically significant differences in binge drinking, heavy drinking or recent marijuana use by annual household income, among White River Junction area adults.



8%

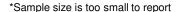
Heavily Drank

6%

16%

6%

Recent Marijuana Use



22% 17% 13%

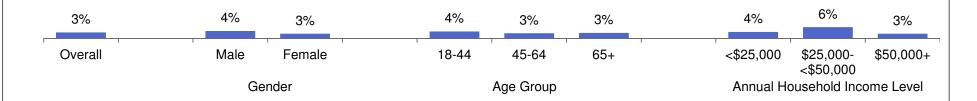
Binge Drank

Overall, less than one in twenty (3%) adults in the White River Junction area said they seldom or never wear a seatbelt when riding or driving in a car. This is statistically similar to the four percent of Vermont adults who reported the same.

White River Junction area men and women never or seldom wear seatbelts at statistically similar rates.

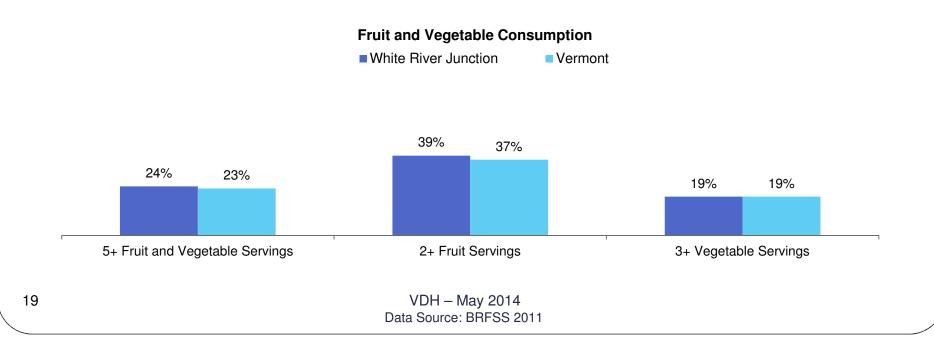
Adult non-use of seatbelts in the White River Junction area also does not differ by age or annual household income level.

## Seldom or Never Wear Seatbelt, Overall and by Sub-groups White River Junction Adults



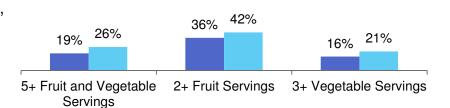
In 2011, about a quarter of White River Junction area adults reported eating the recommended five or more fruit and vegetable servings per day. Four in ten ate two or more fruits and only 19% reported eating three or more vegetable servings.

White River Junction area adult consumption of fruits and vegetables was statistically similar to that among Vermont adults.

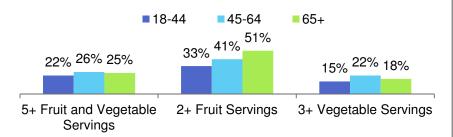


There are no statistical differences in the consumption of fruits and vegetables by gender, age, or annual household income level, among White River Junction area adults.

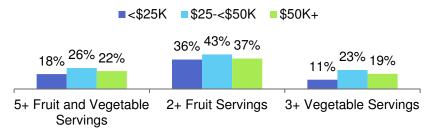
## Preventive Behaviors by Gender White River Junction Adults Men Women



#### **Preventive Behaviors by Age**



#### **Preventive Behaviors by Income Level**

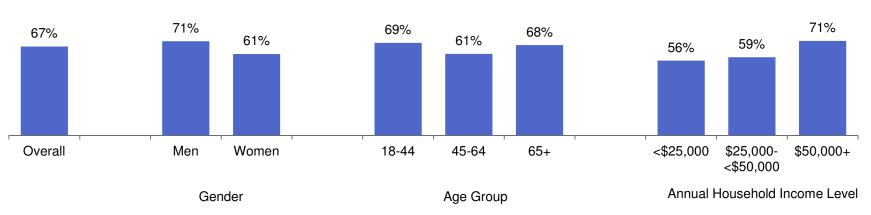


Note: fruit and vegetable data, except that by age, are age adjusted to the U.S. 2000 standard population.

In 2011, about six in ten (59%) Vermont adults reported meeting physical activity recommendations\*. This is similar to the 67% reported among White River Junction area adults.

There are no statistically significant differences in physical activity by gender, age, or annual household income level, among White River Junction area adults.

## Met Physical Activity Recommendations, Overall and by Sub-groups White River Junction Adults



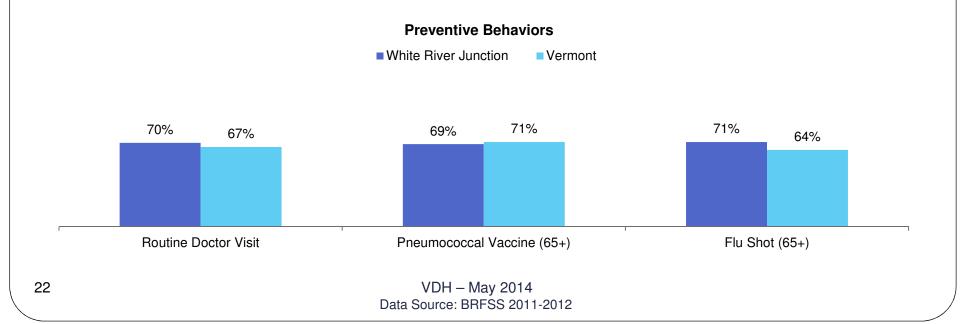
<sup>\*</sup>For adults, the CDC currently recommends they participate in 150 minutes of moderate physical activity or 75 minutes of vigorous activity per week. Strength building activities are recommended at least two times per week. For more information see:

www.cdc.gov/physicalactivity/everyone/guidelines/index.html

Seven in ten adults in the White River Junction area said they saw their doctor for a routine visit in the previous year. This is similar to the 67% reported among all Vermont adults.

White River Junction area adults ages 65 and older also said they had received vaccinations at similar rates to Vermont adults overall.

• Sixty-nine percent of White River Junction adults 65 and older had gotten a pneumococcal vaccine and 71% had gotten a flu shot in the last year, compared with 71% and 64% of Vermont adults, respectively.



Among White River Junction area adults, women are significantly more likely to have made a routine visit to their doctor in the last year, compared with men (76% vs. 64%).

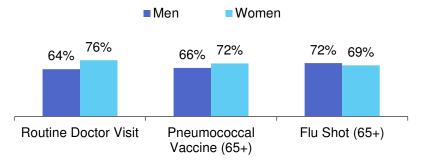
Pneumococcal vaccine or flu shot rates among White River Junction adults 65 and older are statistically similar by gender.

Routine visits to the doctor in the last year increased with age.

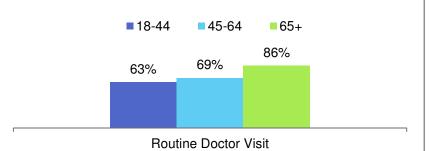
 Adults 65 and older are significantly more likely to have had a routine doctor visit than those in younger age groups.

There are no differences, among White River Junction area adults, in the occurrence of routine doctor visits or vaccination rates by annual household income level.

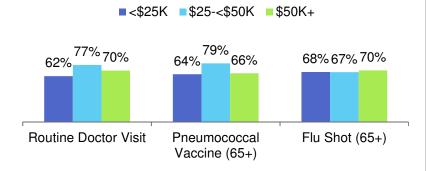
## Preventive Behaviors by Gender White River Junction Adults



#### **Preventive Behaviors by Age**



#### **Preventive Behaviors by Income Level**



## **HIV Screening**

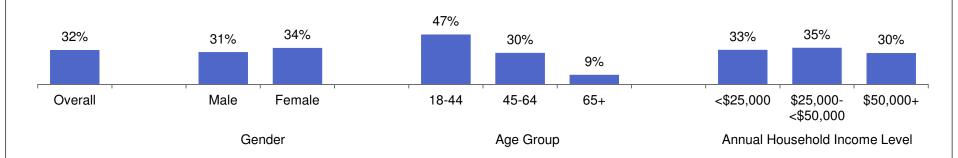
In 2011-2012, about one third of White River Junction area adults had ever been tested for HIV. This is statistically similar to the 30% reported among Vermont adults overall.

Ever having an HIV test decreases with increasing age. In other words, as adults age they are less likely to have had an HIV test.

All differences by age are statistically significant.

There are no differences, among White River Junction adults, in HIV testing by gender and annual household income level.

#### Ever Had HIV Test, Overall and by Sub-Groups White River Junction Adults



### Cancer Screening

In 2012, more than eight in ten (86%) women ages 50-74 in the White River Junction area report meeting breast cancer screening recommendations. This is similar to the 82% among all Vermont women in this age group.

The breast cancer screening recommendation is a mammogram every two years.

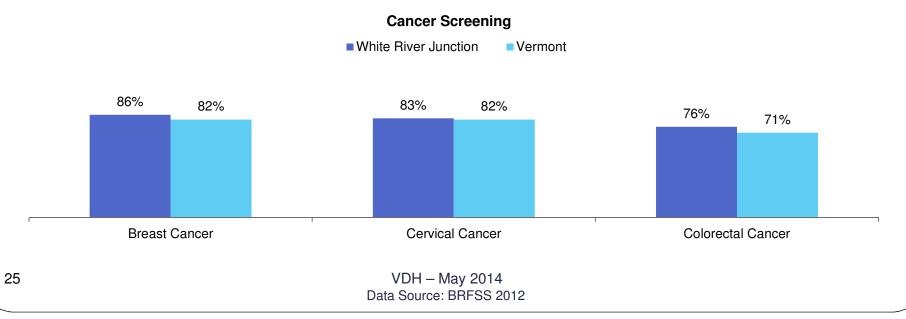
Eighty-three percent of women 21 and older who live in the White River Junction area met cervical cancer screening recommendations, statistically similar to the 82% among Vermont women of the same age.

Cervical cancer screening recommendations are for a PAP test every three years, and excludes women who have had a
hysterectomy.

Among adults 50 to 75 living in the White River Junction area, roughly three-quarters (76%) met colorectal cancer screening recommendations. This also is similar to the rate reported by all Vermonters of the same age (71%).

 Recommendations for screening for colorectal cancer are: a fecal occult blood test (FOBT) annually OR sigmoidoscopy ever five years and FOBT every three years OR colonoscopy ever ten years.

Data on cancer screenings are not broken out by subgroup as the screening recommendations are already limited by age and/or gender.



### **Community Safety and Resources**

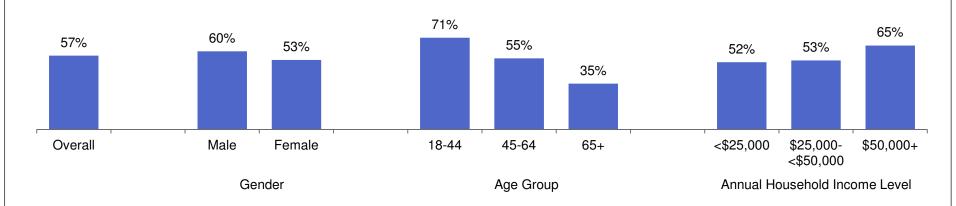
Nearly six in ten (57%) White River Junction area adults said they use community resources for physical activity (e.g. parks, playgrounds and sports fields). This is statistically similar to the 58% reported among Vermont adults.

Use of community resources for physical activity decreases with increasing age.

All differences, among White River Junction adults, are significant by age.

There are no differences in use of community resources for physical activity by gender or annual household income level.

## Use Community Resources for Physical Activity, Overall and by Sub-Groups White River Junction Adults



#### **Additional Information**

## Contact the BRFSS Coordinator for additional information or for BRFSS data Jessie Hammond

Jessie.hammond@state.vt.us

802-863-7663

Additional sub-state level data can be found on the Vermont Department of Health website <a href="http://healthvermont.gov/hv2020/index.aspx">http://healthvermont.gov/hv2020/index.aspx</a>

Towns in the White River Junction Health District are: Bradford, Chelsea, Corinth, Fairlee, Randolph, Strafford, Thetford, Tunbridge, Vershire, West Fairlee, Barnard, Bethel, Bridgewater, Hartford, Hartland, Norwich, Pomfret, Rochester, Royalton, Sharon, Stockbridge, and Woodstock.